

UNITED STATES BANKRUPTCY COURT

FOR THE SOUTHERN DISTRICT

OF TEXAS

UNITED STATES COURTS
SOUTHERN DISTRICT OF TEXAS
FILED
FEB 06 2007
MICHAEL N. MILBY, CLERK OF COURT

In Re:

TWISTER COMMUNICATIONS
NETWORK, INC.

Debtor(s).

CASE NO. 00-34799-H2-7

PETITION FOR UNCLAIMED FUNDS

McClure Schumacher & Associates LLP hereby petitions the Court
for \$3,283.05 being held in the Registry of the Clerk, U.S.
Bankruptcy Court as unclaimed funds.

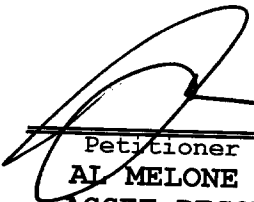
The petitioner did not receive the dividend check in the
above case for the following reason: Change of address. See
certified declaration attached.

The petitioner's current/correct mailing address is:

1225 North Loop West #1050

Houston, TX 77008

Dated: 2-3-07



Petitioner (signature)
AL MELONE (locator)
ASSET RECOVERY TRUST
P.O. BOX 4296
COSTA MESA, CA 92628
(714) 546-8100

**LIMITED POWER OF ATTORNEY/
DECLARATION**

I do hereby grant to **ASSET RECOVERY TRUST**, my sole true and lawful attorney-in-fact for me and in my name, place and stead, giving unto my attorney-in-fact full power to do and perform, on an exclusive basis, all and every act not constituting the practice of law that I may legally do through an attorney-in-fact, for the following limited purpose and for no other:

To reclaim, recover, and return unclaimed funds in the amount of **\$3,283.05** only, less agreed upon fee, to the signatory below.

I do hereby grant my attorney-in-fact every power necessary to carry out the limited purposes for which this limited power of attorney is granted, on an exclusive basis.

This Limited Power of Attorney revokes all previous powers of attorney granted for the purpose of obtaining dividends from this specific bankruptcy case.

I do hereby declare that **McClure Schumacher & Associates LLP** is a rightful creditor of case 00-34799-H2-7, **TWISTER COMMUNICATIONS NETWORK, INC.**, that we moved from 2401 Fountainview #504 in Houston and are presently located at 1225 North Loop West #1050, Houston, TX 77008, that our phone number is 713-622-6000, that the enclosed proof of claim is a true and correct copy of the original, and that we are entitled to this unclaimed dividend.

I do hereby certify under penalty of perjury under U.S. law that the foregoing is true and correct, and that I have authority to sign for the firm.

DATED 1/25/07

SIGNED [Signature]

NAME Jeffrey Schumacher

TITLE Partner

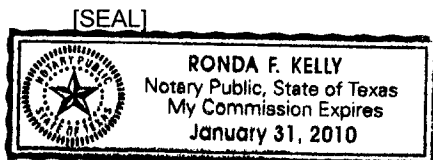
COMPANY McClure Schumacher & Associates LLP

SUBSCRIBED AND SWORN TO BEFORE ME THIS 25th DAY OF Jan, 2007,
TO CERTIFY WITNESS MY HAND AND OFFICIAL SEAL

Ronda F. Kelly
NOTARY PUBLIC IN AND FOR

The State of Texas

My Commission expires on Jan 31, 2010



McClure Schumacher & Associates, L.L.P.

Jeff Schumacher, CPA/ABV, ASA

1225 North Loop West, Suite 1050
Houston, Texas 77008
(713) 622-6000
Fax: (713) 266-1412
jeff@businessvalue.net



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www.businessvalue.net



UNITED STATES BANKRUPTCY COURT		PROOF OF CLAIM	
District of Southern District of Texas (Houston)			
In re (Name of Debtor) Twister Communications Network Inc, 76-0622085		Case Number: 00-34799 - mdl Cred. ID: 1504520	
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.			
Name of Creditor: (The person or other entity to whom the debtor owes money or property)		<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if address differs from the address on the envelope sent to you by the court.	
McClure Schumacher Associates LLP			
Name and Address Where Notices Should be Sent McClure Schumacher Associates LLP 2401 Fountainview Suite 504 Houston TX 77057			
Telephone No		UNITED STATES COURTS SOUTHERN DISTRICT OF TEXAS FILED APR 19 2004 JS MICHAEL N. MILBY, CLERK OF COURT THIS SPACE IS FOR COURT USE ONLY	
ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:			
Check here if this claim <input type="checkbox"/> replaces a previously filed claim, dated: _____ <input type="checkbox"/> amends			
1. BASIS FOR CLAIM: <input checked="" type="checkbox"/> Goods sold <input checked="" type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other (describe briefly): _____ <input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (fill out below) Your social security number _____ Unpaid compensation for services performed from _____ (date) to _____ (date)			
2. DATE DEBT WAS INCURRED 3/27/2000		3. IF COURT JUDGMENT, DATE OBTAINED:	
4. CLASSIFICATION OF CLAIM. Under the Bankruptcy Code all claims are classified as one or more of the following: (1) Unsecured nonpriority, (2) Unsecured Priority, (3) Secured. It is possible for part of a claim to be in one category and part in another. CHECK THE APPROPRIATE BOX OR BOXES below that best describe your claim and STATE THE AMOUNT OF THE CLAIM AT TIME CASE FILED.			
<input type="checkbox"/> SECURED CLAIM \$ _____ Attach evidence of perfection of security interest. Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other (Describe briefly): _____ Amount of arrearage and other charges at time case filed included in secured claim above, if any \$ _____		<input type="checkbox"/> UNSECURED PRIORITY CLAIM \$ _____ Specify the priority of the claim. Wages, salaries, or commissions up to \$4000*, earned not more than 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier—11 U.S.C. § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan—11 U.S.C. § 507(a)(4) <input type="checkbox"/> Up to \$1,800* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use—11 U.S.C. § (507)(a)(6) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child—11 U.S.C. § 507(a)(7) <input type="checkbox"/> Taxes or penalties of governmental units—11 U.S.C. § 507(a)(8) <input type="checkbox"/> Other—Specify applicable paragraph of 11 U.S.C. § 507(a) Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after date of adjustment.	
<input type="checkbox"/> UNSECURED NONPRIORITY CLAIM \$ 3243.00 A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim.			
<input type="checkbox"/> UNSECURED PRIORITY CLAIM \$ _____			
5. TOTAL AMOUNT OF CLAIM AT TIME CASE FILED: \$ _____ (Unsecured) \$ _____ (Secured) \$ _____ (Priority) \$ _____ (Total)			
<input type="checkbox"/> Check this box if claim includes charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.			
6. CREDITS AND SETOFFS. The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor.			
7. SUPPORTING DOCUMENTS. Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, or evidence of security interests to original and each copy. If the documents are not available, explain. If the documents are voluminous, attach a summary.			
8. DATE-STAMPED COPY. To receive an acknowledgement of the filing of your claim, enclose a stamped, self-addressed envelope and additional copy of this proof of claim.			
DATE: 9/5/00		Sign and print the name and title of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): JEFFREY SCHUMACHER	

PENALTY for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT
OF TEXAS


IN RE:) CASE NO. 00-34799-H2-7
)
)
TWISTER COMMUNICATIONS)
NETWORK, INC.) NOTICE OF SERVICE
)
Debtor(s))

Notice is hereby given to the court that on 2-3-07
the following parties were served, via first class mail, of the
intent of McClure Schumacher & Associates LLP, whose mailing
address is 1225 North Loop West #1050, Houston, TX 77008 to
apply for the release of unclaimed funds in the above named case:

U.S. Trustee's Office
515 Rusk Ave, Suite 3516
Houston, TX 77002

U.S. Attorney's Office
P.O. Box 61129
Houston, TX 77208

Respectfully submitted,


AL MELONE (locator)
ASSET RECOVERY TRUST
P.O. BOX 4296
COSTA MESA, CA 92628
(714) 546-8100